


PTO/SB/22 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

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|   |            |  |           |
|---|------------|--|-----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2006</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  |            | <b>Docket Number (Optional)</b><br>0933-0246PUS1 |           |
| <b>Application Number</b> 10/537,102-Conf. #2142  |            | <b>Filed</b> June 2, 2005                        |           |
| For <b>THE TRANSMEMBRANE PROTEIN AMIGO AND USES THEREOF</b>   |            |  |           |
| <b>Art Unit</b> 1649  |            | <b>Examiner</b> C. Y. Wang                       |           |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |  |           |
|   | <b>Fee</b> | <b>Small Entity Fee</b>                          |           |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120      | \$60   | \$ _____  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450      | \$225  | \$ _____  |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1020     | \$510  | \$ 510.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590     | \$795  | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160     | \$1080   | \$ _____  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |            |  |           |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.   |            |  |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |  |           |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |            |  |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.                     |            |  |           |
| I am the <input type="checkbox"/> applicant/inventor.   |            |  |           |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |            |  |           |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>28,977</u>  |            |  |           |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |            |  |           |
| <br>Signature  |            | January 8, 2007<br>Date                          |           |
| Gerald M. Murphy, Jr.<br>Typed or printed name  |            | (703) 205-8000<br>Telephone Number               |           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |            |  |           |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |            |  |           |

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IFW #

PTO/SB/17 (07-06)  
Approved for use through 01/31/2007. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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|   |  |                          |                        |
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| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><br><b>FEE TRANSMITTAL</b><br><b>For FY 2006</b> |  | <b>Complete if Known</b> |                        |
|   |  | Application Number       | 10/537,102-Conf. #2142 |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |  | Filing Date              | June 2, 2005           |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 510.00   |  | First Named Inventor     | Juha KUJA-PANULA       |
|   |  | Examiner Name            | C. Y. Wang             |
|   |  | Art Unit                 | 1649                   |
|   |  | Attorney Docket No.      | 0933-0246PUS1          |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input checked="" type="checkbox"/> Check  | <input type="checkbox"/> Credit Card   |
| <input type="checkbox"/> Money Order   | <input type="checkbox"/> None  |
| <input type="checkbox"/> Other (please identify): _____  |  |
| <input type="checkbox"/> Deposit Account   | Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |  |
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee                            |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments  |

|   |                    |                     |   |                      |                                      |                       |                       |
|---|--------------------|---------------------|---|----------------------|--------------------------------------|-----------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                    |                     |   |                      |                                      |                       |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                    |                     |   |                      |                                      |                       |                       |
|   | <b>FILING FEES</b> |                     | <b>SEARCH FEES</b>                                      |                      | <b>EXAMINATION FEES</b>              |                       |                       |
|   |                    | <b>Small Entity</b> |   | <b>Small Entity</b>  |                                      | <b>Small Entity</b>   |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>      | <b>Fee (\$)</b>                      | <b>Fee (\$)</b>       | <b>Fees Paid (\$)</b> |
| Utility   | 300                | 150                 | 500   | 250                  | 200                                  | 100                   |                       |
| Design  | 200                | 100                 | 100   | 50                   | 130                                  | 65                    |                       |
| Plant   | 200                | 100                 | 300   | 150                  | 160                                  | 80                    |                       |
| Reissue   | 300                | 150                 | 500   | 250                  | 600                                  | 300                   |                       |
| Provisional   | 200                | 100                 | 0   | 0                    | 0                                    | 0                     |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                    |                     |   |                      |                                      |                       |                       |
| <b>Fee Description</b>  |                    |                     |   |                      |                                      | <b>Small Entity</b>   |                       |
|   |                    |                     |   |                      |                                      | <b>Fee (\$)</b>       | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                    |                     |   |                      |                                      | 50                    | 25                    |
| Each independent claim over 3 (including Reissues)  |                    |                     |   |                      |                                      | 200                   | 100                   |
| Multiple dependent claims   |                    |                     |   |                      |                                      | 360                   | 180                   |
| <b>Total Claims</b>   |                    | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b>     |                       |                       |
| - =   |                    | x                   | =   |                      | <b>Fee (\$)</b> <b>Fee Paid (\$)</b> |                       |                       |
| HP = highest number of total claims paid for, if greater than 20.   |                    |                     |   |                      |                                      |                       |                       |
| <b>Indep. Claims</b>  |                    | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> |                                      |                       |                       |
| - =   |                    | x                   | =   |                      |                                      |                       |                       |
| HP = highest number of independent claims paid for, if greater than 3.  |                    |                     |   |                      |                                      |                       |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                    |                     |   |                      |                                      |                       |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                    |                     |   |                      |                                      |                       |                       |
| <b>Total Sheets</b>   |                    | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                      | <b>Fee (\$)</b>                      | <b>Fee Paid (\$)</b>  |                       |
| - 100 =   |                    | /50                 | (round up to a whole number) x                          |                      | =                                    |                       |                       |
| <b>4. OTHER FEE(S)</b>  |                    |                     |   |                      |                                      |                       |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                    |                     |   |                      |                                      | <b>Fees Paid (\$)</b> |                       |
| Other (e.g., late filing surcharge): <u>2253 Extension for response within third month</u>  |                    |                     |   |                      |                                      | 510.00                |                       |

|                     |                       |                                   |                 |
|---------------------|-----------------------|-----------------------------------|-----------------|
| <b>SUBMITTED BY</b> |                       |                                   |                 |
| Signature           |                       | Registration No. (Attorney/Agent) | 28,977          |
| Name (Print/Type)   | Gerald M. Murphy, Jr. | Telephone                         | (703) 205-8000  |
|                     |                       | Date                              | January 8, 2007 |